

3673

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

In re the application of

John E. Mercer

Serial No: 09/898,989

Filed: July 3, 2001

For: BORING TOOL CONTROL USING REMOTE LOCATOR

Examiner: Sunil Singh

Art Unit: 3673

Attorney Docket: DCI-15C2

Date: May 5, 2004

CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner of Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on May 5, 2004.

Signed:

Jay R Beyer

RECEIVED

MAY 12 2004

GROUP 3600

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SIR: Transmitted herewith is an Amendment for the above application.

Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established
 No additional fee is required.
 Postcard included

The fee has been calculated as shown below:

(Col. 1)

(Col. 2)

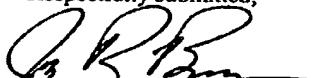
(Col. 3)

SMALL ENTITY

NON- SMALL ENTITY

	Claims Remaining	Minus	Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total Claims	* 61	Minus	** 68	0	x 9	\$ 0	x 18	\$
Indep. Claims	*42	Minus	*** 42	0	x 43	\$ 0	x 86	\$
First Presentation of Multiple Dependent Claim(s)								
* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.								
** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.								
*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.								
<input checked="" type="checkbox"/>	Applicant(s) hereby Petition(s) for an Extension of Time of <u>1</u> month(s) pursuant to 37 C.F.R. § 1.136(a).							
<input checked="" type="checkbox"/>	Please charge my Deposit Account No. <u>19-1685</u> (Order No. DCI-15C2) the amount of \$ <u>55.00</u> to cover the extension of time fee. A duplicate copy of this sheet is enclosed.							
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <u>19-1685</u> (Order No. DCI-15C2) (a duplicate copy of this sheet is enclosed):							
<input checked="" type="checkbox"/>	Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.							
<input checked="" type="checkbox"/>	Any extension or petition fees under 37 C.F.R. § 1.17.							

Respectfully submitted,


Jay R Beyer
Registration No. 39,907

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55.00 DA